

## REMARKS

### ***Substance of Interview – April 5, 2007***

The Applicant thanks Examiner Pass for her helpful comments during a telephonic interview with the undersigned and Patrick Myers on April 5, 2007. The interview on April 5, 2007 included a discussion of all of the pending claims. In particular, claim 1 was discussed in view of the cited prior art (Burks et al., U.S. Patent 6,453,297; Campell et al., U.S. Patent 6,047,259; Berman et al., U.S. Patent 5,995,939). The interview included a discussion of processing and creating insurance claims.

### ***Substance of Interview – May 31, 2007***

The Applicant thanks Examiner Pass and Examiner Gilligan for their helpful comments during a telephonic interview with the undersigned and Patrick Myers on May 31, 2007. The interview on May 31, 2007 included a discussion of all of the pending claims. In particular, claim 1 was discussed in view of the cited prior art (Burks et al., U.S. Patent 6,453,297; Campell et al., U.S. Patent 6,047,259; Berman et al., U.S. Patent 5,995,939). The interview included a discussion of “storing one or more insurance rules in an insurance company rules database on a medical practice management server.”

### ***Claim Rejections***

#### ***35 U.S.C. §112 rejections:***

1. The Examiner has rejected claim 24 under 35 U.S.C. 112, first paragraph, stating that “an association” is not disclosed in the specification. Claim 24 has been amended to remove “an association.” Thus, the rejection of claim 24 is now moot.

#### ***35 U.S.C. §103 rejections:***

2. The Examiner has rejected claims 1-8, 13-20, 24-28, and 30-33 under 35 U.S.C. 103(a) as being unpatentable over Burks et al., U.S. Patent Number 6,453,297 and further in view of Campbell et al., U.S. Patent Number 6,047,259. Applicant respectfully disagrees and traverses the rejections.

Claim 1 as now amended teaches a method for managing a medical practice. The method comprises (a) storing one or more insurance rules in an insurance company rules database on a medical practice management server; (f) performing, by the medical practice management server, one or more workflow tasks in a billing workflow, which examines and processes an insurance claim, associated with the event; (g) automatically and repeatedly interacting with the information associated with the event during the patient workflow tasks and billing workflow tasks to correct an error, a deficiency, or any combination thereof by applying one or more rules within a set of rules in a rules engine or performing transactions with the payor server; and (h) using at least a portion of the information, which is defined by the one or more insurance rules

that apply to the payor server, associated with the event to create an insurance claim, which is formatted according to the one or more insurance rules that apply to the payor server, following completion of the one or more tasks. Claim 15 recites a medical practice management system; Claim 20 recites a medical practice management system; Claim 27 recites a method for managing a medical practice; and Claim 28 recites a computer program product for managing a medical practice management system. Each of these claims has been similarly amended.

Both references, Burks et al. and Campbell et al., fail, at least, to teach a system, method, or computer program product (as embodied in independent claims 1, 15, 20, 27 and 28) that stores one or more insurance rules in an insurance company rules database; examines and processes an insurance claim; corrects an error, a deficiency, or any combination thereof in a billing workflow; uses a portion of the information, which is defined by the one or more insurance rules that apply to the payor server, to create an insurance claim, and formats the insurance claim according to the one or more insurance rules that apply to the payor server. Therefore, the combination of Burks et al. and Campbell et al. does not render the claims 1-8, 13-20, 24-28, and 30-33 unpatentable.

Burks et al. teaches “that information to maintain a centralized database for validating claims is not required from the insurance carriers.” (Burks et al.: col. 4, lines 4-6; abstract). Furthermore, Burks et al. teaches that “there is no requirement for system 10 to have a centralized database having specific insurance carrier information for processing or adjudicating medical claims.” (Burks et al.: col. 6, lines 31-33).

Campbell et al. teaches a “system for tracking workflow through a medical facility . . . , managing medical exams of patients in the facility, and managing a treatment protocols for the patients.” (Campbell et al.: col. 1, lines 51-53). Furthermore, Campbell et al. teaches that the “computer is responsible for handling billing of clients” which includes receiving or confirming some form of payment from the client. (Campbell et al.: col. 7, lines 13-15; col. 21, lines 14-16).

Thus, both Burke et al. and Campbell et al. fail to teach or suggest numerous aspects of the invention, as embodied in independent claims 1, 15, 20, 27 and 28. For at least these reasons, the rejections for claims 1, 15, 20, 27, and 28 as now amended should be withdrawn and the claims passed to allowance by virtue of the distinctions from the prior art of record. The rejections for dependent claims 2-8, 13-14, 16-19, 24-26, and 30-33 should be withdrawn and the claims passed to allowance by virtue of their dependency from claims 1, 15, 20, 27, and 28 and the additional features recited therein.

3. The Examiner has rejected claims 9-11 under 35 U.S.C. 103(a) as being unpatentable over Burks et al., U.S. Patent Number 6,453,297 and Campbell et al., U.S. Patent Number 6,047,259 and further in view of Berman et al., U.S. Patent Number 6,047,259. Applicant respectfully disagrees and traverses the rejections.

Claims 9-11, as now amended, recite a method dependent from claim 1. Claim 1 as now amended teaches a method for managing a medical practice. The method comprises (a) storing one or more insurance rules in an insurance company rules database on a medical practice management server; (f) performing, by the medical practice management server, one or more workflow tasks in a billing workflow, which examines and processes an insurance claim,

associated with the event; (g) automatically and repeatedly interacting with the information associated with the event during the patient workflow tasks and billing workflow tasks to correct an error, a deficiency, or any combination thereof by applying one or more rules within a set of rules in a rules engine or performing transactions with the payor server; and (h) using at least a portion of the information, which is defined by the one or more insurance rules that apply to the payor server, associated with the event to create an insurance claim, which is formatted according to the one or more insurance rules that apply to the payor server, following completion of the one or more tasks.

The three references, Burks et al., Campbell et al., and Berman et al., fail, at least, to teach a method (as embodied in independent claim 1) that stores one or more insurance rules in an insurance company rules database; examines and processes an insurance claim; corrects an error, a deficiency, or any combination thereof in a billing workflow; uses a portion of the information, which is defined by the one or more insurance rules that apply to the payor server, to create an insurance claim, and formats the insurance claim according to the one or more insurance rules that apply to the payor server. Therefore, the combination of Burks et al., Campbell et al., and Berman et al. does not render the claims 9-11 unpatentable.

Applicant reiterates the discussion of Burks et al. recited above. Thus, the discussion of Burks et al. does not need to be repeated herein.

Applicant reiterates the discussion of Campbell et al. recited above. Thus, the discussion of Campbell et al. does not need to be repeated herein.

Berman et al. teaches an email-based system wherein personnel at the client site compose service requests and email them directly to the sponsors, upon which sponsors then receive the email messages in an email inbox, perform the request manually, and then send a response email. (Berman et al.: col. 3, lines 44-52).

Thus, Burke et al., Campbell et al., and Berman et al. fail to teach or suggest numerous aspects of the invention, as embodied in independent claim 1. For at least these reasons, the rejections for claims 9-11 as now amended should be withdrawn and the claims passed to allowance by virtue of their dependency from claim 1 as now amended, their distinctions from the prior art of record, and the additional features recited therein.

4. The Examiner has rejected claim 12 under 35 U.S.C. 103(a) as being unpatentable over Burks et al., U.S. Patent Number 6,453,297 and Campbell et al., U.S. Patent Number 6,047,259 and further in view of Ilsen et al., U.S. Patent Number 6,757,898. Applicant respectfully disagrees and traverses the rejections.

Claim 12 recites a method dependent from claim 1 wherein the workflow tasks in the patient workflow performed during the event further comprise at least one of performing check-in tasks, performing check-out tasks, or any combination thereof. Claim 1 as now amended teaches a method for managing a medical practice. The method comprises (a) storing one or more insurance rules in an insurance company rules database on a medical practice management server; (f) performing, by the medical practice management server, one or more workflow tasks in a billing workflow, which examines and processes an insurance claim, associated with the

event; (g) automatically and repeatedly interacting with the information associated with the event during the patient workflow tasks and billing workflow tasks to correct an error, a deficiency, or any combination thereof by applying one or more rules within a set of rules in a rules engine or performing transactions with the payor server; and (h) using at least a portion of the information, which is defined by the one or more insurance rules that apply to the payor server, associated with the event to create an insurance claim, which is formatted according to the one or more insurance rules that apply to the payor server, following completion of the one or more tasks.

The three references, Burks et al., Campbell et al., and Ilsen et al., fail, at least, to teach a method (as embodied in independent claim 1) that stores one or more insurance rules in an insurance company rules database; examines and processes an insurance claim; corrects an error, a deficiency, or any combination thereof in a billing workflow; uses a portion of the information, which is defined by the one or more insurance rules that apply to the payor server, to create an insurance claim, and formats the insurance claim according to the one or more insurance rules that apply to the payor server. Therefore, the combination of Burks et al., Campbell et al., and Ilsen et al. does not render claim 12 unpatentable.

Applicant reiterates the discussion of Burks et al. recited above. Thus, the discussion of Burks et al. does not need to be repeated herein.

Applicant reiterates the discussion of Campbell et al. recited above. Thus, the discussion of Campbell et al. does not need to be repeated herein.

Ilsen et al. teaches a “system, [which] provides an automated service to patients, through which access to their own doctor is provided over the Internet without additional work for the

doctor's office because it is based upon existing records.” (Ilsen et al.: col. 4, lines 24-29).

Furthermore, Ilsen et al. teaches that the system provides information “for simply inquiries and follow-up instructions, for prescription refill and appointment requests, and for directions to the office, laboratory, radiologist or specialist's office, general information and the like.” (Ilsen et al.: col. 9, lines 33-37).

Thus, Burks et al., Campbell et al., and Ilsen et al. fail to teach or suggest numerous aspects of the invention, as embodied in independent claim 1. For at least these reasons, the rejection for claim 12 should be withdrawn and the claims passed to allowance by virtue of its dependency from claim 1 as now amended, its distinctions from the prior art of record, and the additional features recited therein.

***Support for Claims 1, 3, 15, 20, 24, 27-28, and 31***

Support for the amendments of claims 1, 3, 15, 20, 24, 27-28, and 31 can be found at least in the claims as originally filed, FIGs. 1, 2, 3F, 8C, and 8E and paragraphs [0042], [0044], [0045], [0048], [0049], [0052], [0055], [0056], [0057], [0058], [0062], [0064], [0067], [0071], [0081], [0087], [0089], [0100], [0102], [0103], and [0114] of the specification as originally filed.



## CONCLUSION

Applicant's discussion of particular positions of the Examiner does not constitute a concession with respect to any positions that are not expressly contested by the Applicant. Applicant's emphasis of particular reasons why the claims are patentable does not imply that there are not other sufficient reasons why the claims are patentable.

In view of the foregoing remarks and the inability of the prior art, alone or in combination, to anticipate, suggest or make obvious the subject matter as a whole of the invention disclosed and claimed in this application, all the claims are submitted to be in a condition for allowance, and notice thereof is respectfully requested. If the examiner feels that a telephone conference would expedite prosecution of this case, the Examiner is invited to call the undersigned.

Respectfully submitted,

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